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**AMGEN®**Amgen Inc.  
Law Department  
1201 Amgen Court West  
Seattle, WA 98119Telephone: (206) 265-7189  
Facsimile: 206-233-0644  
e-mail: jhenry@amgen.com**FAX MESSAGE - PLEASE DELIVER IMMEDIATELY**

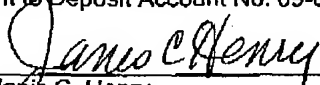
Send to:	United States Patent Office ATTN: TC1600 Group Art Unit 1646	FAX: 703-872-9306
From:	Janis C. Henry Senior Patent Counsel 206-265-7189	Date: July 23, 2004
No. of pages including this page:		11

Re: US Patent Application Serial No: 10/061,727  
Filed: October 26, 2001  
For: IL-1 RECEPTOR ACCESSORY PROTEIN  
Our Ref.: 3151-AThe following documents are being facsimile transmitted to the USPTO, ATTN:  
TC1600:Fee Authorization /Amendment Transmittal (1 page + copy)  
Notice of Appeal (1 page + copy)  
Amendment and Response (6 pages)

If transmission problems occur contact Nanci Kertson at 206-587-0430 Ext. 57449.

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## PATENT APPLICATION

<b>FEE AUTHORIZATION / AMENDMENT TRANSMITTAL</b>				Attorney's Docket No: 3151-A		
Serial No. <b>10/061,727</b>	Filing Date <b>October 26, 2001</b>	Examiner <b>R. Li</b>	Group Art Unit <b>1646</b>			
In Re Application of John E. Sims and Dirk E. Smith						
For IL-1 RECEPTOR ACCESSORY PROTEIN						
TO THE COMMISSIONER FOR PATENTS:						
<input checked="" type="checkbox"/> Applicant(s) request(s) the following extension of time under 37 CFR 1.136(a): <ul style="list-style-type: none"> <li><input type="checkbox"/> One month of original due date (\$110.00)</li> <li><input checked="" type="checkbox"/> Two months of original due date (\$420.00)</li> <li><input type="checkbox"/> Three months of original due date (\$950.00)</li> <li><input type="checkbox"/> Four months of original due date (\$1,480.00)</li> <li><input type="checkbox"/> Five months of original due date (\$2,010.00)</li> </ul>						
<input checked="" type="checkbox"/> A response in connection with the matter for which this extension is requested: <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> is filed herewith.</li> <li><input type="checkbox"/> has been filed.</li> <li><input type="checkbox"/> The response is the filing of a continuing prosecution application, the prior application having an express abandonment conditioned on the granting of a filing date to the continuing application.</li> </ul>						
<input checked="" type="checkbox"/> The accompanying papers include amended claims for which no additional fee is required. <input type="checkbox"/> The accompanying papers include amended claims the fee for which has been calculated as follows:						
<b>CLAIMS AS AMENDED</b>						
(1)	(2) Claims remaining After amendment	(3)	(4) Highest number Previously paid for	(5) No. of Extra claims present	(6) Rate	(7) Additional Fee
Total Claims		Minus	=	0	x \$18	= \$ 0.00
Indep. Claims		Minus	=	0	x \$86	= 0.00
<input type="checkbox"/> First Appearance of a multiple dependent claim					+ \$290	= 0.00
<b>Total Additional Fee for this Amendment</b>					<b>\$0.00</b>	
<p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.</p> <p>The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col 1. of a prior amendment or the number of claims originally filed.</p> <p><input type="checkbox"/> The following other fees are incurred by the accompanying papers.</p> <p style="padding-left: 20px;"><input type="checkbox"/> Other: _____</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account No. 09-0089 in the name of Immunex Corporation in the amount of \$420.00. A duplicate copy of this petition is attached.</p> <p><input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a request therefore.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 09-0089.</p>						
Please Send Future Correspondence To:						
Immunex Corporation Law Department 1201 Amgen Court West Seattle, Washington 98119-3105 (206) 265-7000				 Janis C. Henry Attorney/Agent for Applicants Registration No.: 34,347 Phone: (206) 265-7189 Date: June 23, 2004		

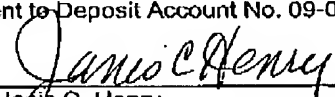
## CERTIFICATE OF FACSIMILE TRANSMISSION

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July 23, 2004  
Date

  
Signature

## PATENT APPLICATION

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<input type="checkbox"/> First Appearance of a multiple dependent claim					+	\$290
Total Additional Fee for this Amendment						\$0.00
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Please Send Future Correspondence To:						
Immunex Corporation Law Department 1201 Amgen Court West Seattle, Washington 98119-3105 (206) 265-7000				<div style="text-align: center;">           Janis C. Henry          Attorney/Agent for Applicants          Registration No.: 34,347          Phone: (206) 265-7189          Date: June 23, 2004       </div>		

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Janis C. Henry  
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Appl. No. 10/061,727  
Amdt. dated July 23, 2004  
Resp. to Office Action dated February 24, 2004

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JUL 23 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In the Application of:

John E. Sims and Dirk E. Smith

Attorney Docket No. 3151-A

Serial No.: 10/061,727

Group Art Unit: 1646

Filed: October 26, 2001

Examiner: Li, Ruixiang

For: IL-1 Receptor Accessory Protein

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Amendment and Response**

Dear Sir:

Responsive to the Office Action mailed February 24, 2004 in connection with the above-identified US patent application, Applicants amend the application as follows:

Amendments to the claims begin on page 2 of this paper.

Remarks begin on page 5 of this paper.